			Application or Docket Number											
	PATENT APPLICATION FEE DETERMINATION RECORD													
Effective October 1, 2003									107707					
CLAIMS AS FILED - PART I								SMALL E	NTITY		OTHER	THAN		
			(Column	olumn 1) (Column 2)			,	TYPE [		OR	SMALL	ENTITY		
TOTAL CLAIMS			9.2					RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMB	ER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00		
TOTAL CHARGEABLE CLAIMS			Q minus 20=		•			X\$ 9=		OR	X\$18=			
INE	EPENDENT CL	AIMS	5 minus 3 =		2			X43=		OR	X86=	177		
MU	ILTIPLE DEPEN	IDENT CLAIM PI	RESENT	······································				+145=		OR	+290=			
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL		OR	TOTAL	947		
CLAIMS AS AMENDED - PART II Z-18-(							()	0			OTHER	1		
(Column 1)				(Column 2) (Column 3)				SMALL	ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING		HIGH NUME	BER	PRESENT		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL		
		AFTER AMENDMENT		PREVIC PAID I		EXTRA		MAIL	FEE			FEE		
	Total	·H)	Minus	7)		ٿ	$[ \ ]$	X\$ 9=		OR	X\$18=			
	Independent	.75	Minus	****\F	<u> </u>	-		X43=		OR	X86=			
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM	L	1	+145=		OR	+290=			
								TOTAL		"	TOTAL			
								ADDIT. FEE	L	OR	ADDIT. FEE			
		(Column 1)		(Colun		(Column 3)	, .							
AMENDMENT B		CLAIMS REMAINING		HIGH NUM	-	PRESENT	ll	2475	ADDI-		SATE	ADDI-		
		AFTER AMENDMENT		PREVIO		EXTRA	H	RATE	TIONAL		RATE	TIONAL FEE		
	Total	*	Minus	**	<u></u>	=	11	X\$ 9=		OR	X\$18=			
	Independent	×	Minus	***		=		X43=		OR	X86=			
	FIRST PRESE	NTATION OF MU	ILTIPLE DEF	PENDENT	CLAIM		J	. 4.45			.200-			
+145=										OR	+290=	•		
TOTAL ADDIT. FEE										OR	TOTAL ADDIT. FEE			
(Column 1) (Column 2) (Column 3)														
0	`	CLAIMS REMAINING		HIGH	EST	PRESENT	1 r		ADDI-			ADDI-		
Ę		AFTER		PREVIO	USLY	EXTRA		RATE	TIONAL		RATE	TIONAL		
Z Z		AMENDMENT		PAID	FOR	<del></del>	1 }		FEE			FEE		
AMENDMENT C	Total	*	Minus	**		=	<b>{</b>	X\$ 9=		OR	X\$18=			
AM	Independent	* .	Minus	***	CL A154	]=	11	X43=		OR	X86=			
	FIRST PRESE	NTATION OF MU	JLTIPLE DE	CUDENI	CLAIM		1	+145=		OR	+290=			
* If the entry in column 1 is less than the entry in column 2 write "0" in column 3											TOTAL			
***	If the "Highest Nu	mber Previously Pa	id For IN THI	S SPACE is	s less tha	n 3, enter "3."	•	ADDIT. FEE			ADDIT. FEE			
	The Highest Num	ber Previously Pai	d For (Total or	Independe	ent) is the	highest number	er fou	ind in the ap	propriate bo	k in co	lumn 1.			

FORM PTO-875 (Rev 10/03)

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